

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Peggy Lamm for Congress

ADDRESS (number and street) 6444 Simms Street #132  
 Check if different than previously reported. (ACC)  
Arvada CO 80004

2. **FEC IDENTIFICATION NUMBER** C00411041  
**CITY** STATE ZIP CODE STATE DISTRICT  
CO 7

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)  
(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 07 20 2006 through 09 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Theresa Tomich

Signature of Treasurer Electronically Filed by Theresa Tomich Date 10 13 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Peggy Lamm for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
2	0

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	96204.52	802957.62
(b) Total Contribution Refunds (from Line 20(d)).....	61491.00	61491.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	34713.52	741466.62
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	261628.56	738089.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	1234.64	1284.64
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	260393.92	736805.11
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	4947.59	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	29571.33	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
Peggy Lamm for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
2	0

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

70059.00

611745.09

(ii) Unitemized.....

22445.50

177797.51

(iii) TOTAL of contributions

92504.50

789542.60

from individuals..... ▶

0.00

615.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

3700.02

12800.02

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)

96204.52

802957.62

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

1234.64

1284.64

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

0.00

386.08

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

97439.16

804628.34

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	261628.56	738089.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	61491.00	61491.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	61491.00	61491.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	323119.56	799580.75

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	230627.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	97439.16
25. SUBTOTAL (add Line 23 and Line 24).....	328067.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	323119.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4947.59

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald J. Humphrey

Mailing Address 2000 5th Street #C

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Martin & Mahaffy Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4030630

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Constance Anderson

Mailing Address 895 Dearborn Street

City State Zip Code  
Aurora CO 80011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2006

Transaction ID: C4030680

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bonnie S. Margolin

Mailing Address 3204 South Elmira Court

City State Zip Code  
Denver CO 80231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 204.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2006

Transaction ID: C4030710

Amount of Each Receipt this Period  
54.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 254.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Radford Byerly

Mailing Address 1811 Columbine Ave.

City State Zip Code  
Boulder CO 80302

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2006

Transaction ID: C4079590

Amount of Each Receipt this Period  
1100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Angela Case

Mailing Address 1750 30th Street #613

City State Zip Code  
Boulder CO 80301

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2006

Transaction ID: C4032920

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
John McDaniel

Mailing Address 405 2nd Avenue

City State Zip Code  
Monte Vista CO 81144-1110

FEC ID number of contributing federal political committee. **C**

Name of Employer Adams State College Occupation Professor of History

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1350.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2006

Transaction ID: C4033720

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Jill Crow		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2006
Mailing Address 1143 Harrison St.		Transaction ID: C4028470
City State Zip Code Denver CO 80206	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investments Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Susan Thomas		Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2006
Mailing Address 5784 S. Florence St.		Transaction ID: C4029100
City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N/A Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Housewife Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Barbara A. Sutton		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2006
Mailing Address P.O. Box 613		Transaction ID: C4029240
City State Zip Code Westcliffe CO 81252	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N/A Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 1600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sally Jill Crow

Mailing Address 1143 Harrison Street

City State Zip Code  
Denver CO 80206

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investments

Receipt For: 2006 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 23 / 2006

Transaction ID: C4029610

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lee Driscoll

Mailing Address 1130 South Franklin Street

City State Zip Code  
Denver CO 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Wynkoop Holdings, Inc. Occupation CEO

Receipt For: 2006 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4029630

Amount of Each Receipt this Period  
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Lee Driscoll

Mailing Address 1130 South Franklin Street

City State Zip Code  
Denver CO 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Wynkoop Holdings, Inc. Occupation CEO

Receipt For: 2006 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4029611

Amount of Each Receipt this Period  
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 124
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Deane Shatz</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 4243 Lenore Lane NW		<b>Transaction ID: C4031001</b>	
City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NA Occupation Retired	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Ray E Short</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2006	
Mailing Address 505 South Miller Avenue		<b>Transaction ID: C4030631</b>	
City State Zip Code Lafayette CO 80026	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Occupation Author	Election Cycle-to-Date ▼ 375.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mark J Cavanaugh</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2006	
Mailing Address 1050 Monroe Street		<b>Transaction ID: C4030641</b>	
City State Zip Code Denver CO 80206-3346	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bighorn Center Occupation Senior Policy Analyst	Election Cycle-to-Date ▼ 700.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Helen Prindle Grant		Date of Receipt M M / D D / Y Y Y Y Y 07 / 28 / 2006	
Mailing Address 101 S Humboldt St		Transaction ID: C4030671	
City State Zip Code Denver CO 80209-2515	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NA Occupation Retired	Election Cycle-to-Date ▼ 325.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> James Cox Kennedy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 27 / 2006	
Mailing Address PO Box 105357		Transaction ID: C4030721	
City State Zip Code Atlanta GA 30348	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Cox Enterprises Occupation CEO	Election Cycle-to-Date ▼ 2100.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mark A.r. Chalfant		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006	
Mailing Address 1030 Katy Lane		Transaction ID: C4031021	
City State Zip Code Longmont CO 80504	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer US Government Occupation Attorney	Election Cycle-to-Date ▼ 1025.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
George Miller

Mailing Address 31 W 76th Street

City State Zip Code  
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Simpson Thatcher Bartlett LLP Lawyer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 593.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

**Transaction ID:** C4031081

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Phillip W. Earle

Mailing Address 1515 E. 8th Ave.  
Apt. #1

City State Zip Code  
Denver CO 80218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Interior Designer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

**Transaction ID:** C4031211

Amount of Each Receipt this Period  
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Heather C. Noonan

Mailing Address 2955 S. Clarkson St.

City State Zip Code  
Englewood CO 80113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

**Transaction ID:** C4031231

Amount of Each Receipt this Period  
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Jo Whetzel		Date of Receipt M M / D D / Y Y Y Y Y 09 / 18 / 2006
Mailing Address 5036 Castleman Street		Transaction ID: C4079611
City State Zip Code Pittsburgh PA 15232	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NA Occupation Retired	Election Cycle-to-Date ▼ 350.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary		

Full Name (Last, First, Middle Initial) <b>B.</b> Lin Merage		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006
Mailing Address 5 Carriage Lane		Transaction ID: C4031861
City State Zip Code Littleton CO 80121-2010	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Chef America Occupation Executive	Election Cycle-to-Date ▼ 2100.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Morris Clark		Date of Receipt M M / D D / Y Y Y Y Y 08 / 03 / 2006
Mailing Address 48 Bantala Pl		Transaction ID: C4032811
City State Zip Code Castle Rock CO 80108	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Occupation Oral Surgeon	Election Cycle-to-Date ▼ 1500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>3350.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Tointon

Mailing Address 6305 W 26th St

City State Zip Code  
Greeley CO 80634-8929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phelps-Tointon Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2006

**Transaction ID:** C4032861

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas P Nussbaum

Mailing Address 1515 S Pearl St

City State Zip Code  
Denver CO 80210-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2006

**Transaction ID:** C4028271

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael-Ann Herring

Mailing Address PO Box 2102

City State Zip Code  
Telluride CO 81435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2006

**Transaction ID:** C4028291

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1400.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 14 / 124
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert K Schader</p> <p>Mailing Address 7030 Indian Peaks Trl</p> <p>City State Zip Code Boulder CO 80301-3627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Self Occupation Attorney</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 07 / 2006</p> <p><b>Transaction ID:</b> C4034181</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Andrew Loren Cookler</p> <p>Mailing Address PO Box 358</p> <p>City State Zip Code Nederland CO 80466-0358</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Self Occupation Investments</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 26 / 2006</p> <p><b>Transaction ID:</b> C4029221</p> <p>Amount of Each Receipt this Period 350.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael W Sutton</p> <p>Mailing Address PO Box 613</p> <p>City State Zip Code Westcliffe CO 81252-0613</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer NA Occupation Retired</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 26 / 2006</p> <p><b>Transaction ID:</b> C4029631</p> <p>Amount of Each Receipt this Period 1600.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alfred Metzger

Mailing Address 2560 Hill Circle

City State Zip Code  
Colorado Springs CO 80904-1111

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 293.00

Date of Receipt  
MM / DD / YYYY  
07 / 28 / 2006

Transaction ID: C4030722

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Katherine Roloson

Mailing Address PO Box 2970

City State Zip Code  
Telluride CO 81435

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation housewife

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2006

Transaction ID: C4030982

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Cindy Farber

Mailing Address 75 Sedgwick Place

City State Zip Code  
Englewood CO 80110

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Community Activist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
07 / 31 / 2006

Transaction ID: C4031002

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Stephen Tebo

Mailing Address 2158 Tamarack Ave.

City State Zip Code  
Boulder CO 80304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Tebo Development Company Owner

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4032672

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Joan Ringel

Mailing Address 1970 Holly Street

City State Zip Code  
Denver CO 80220-1447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Writer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 6

Transaction ID: C4032682

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Radford Byerly

Mailing Address 3870 Birchwood Drive

City State Zip Code  
Boulder CO 80304-1419

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4032912

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Lynn Cormey

Mailing Address 50 Meade Lane

City Englewood State CO Zip Code 80113

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

**Transaction ID:** C4033062

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
George Ann Victor

Mailing Address 3751 S. Gilpin Street

City Cherry Hills Villa State CO Zip Code 80113-4012

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 22 / 2006

**Transaction ID:** C4028222

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Colleen J May

Mailing Address PO Box 2448

City Yountville State CA Zip Code 94599

FEC ID number of contributing federal political committee. **C**

Name of Employer Interline Occupation CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2006

**Transaction ID:** C4030672

Amount of Each Receipt this Period  
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Andrew Loren Cookler

Mailing Address PO Box 358

City: Nederland State: CO Zip Code: 80466-0358

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self Occupation: Investments

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	0	6

Transaction ID: C4029252

Amount of Each Receipt this Period  

150.00
--------

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michael W Sutton

Mailing Address PO Box 613

City: Westcliffe State: CO Zip Code: 81252-0613

FEC ID number of contributing federal political committee. **C**

Name of Employer: NA Occupation: Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	0	6

Transaction ID: C4029632

Amount of Each Receipt this Period  

400.00
--------

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles E. Haley

Mailing Address 15426 W. Fairmount Avenue

City: Goodyear State: AZ Zip Code: 85338

FEC ID number of contributing federal political committee. **C**

Name of Employer: NA Occupation: Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Debt PrimaryPrimary

Election Cycle-to-Date ▼ 325.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	6

Transaction ID: C4042003

Amount of Each Receipt this Period  

75.00
-------

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>625.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Johanna W Lilliequist

Mailing Address 16130 West 64th Way

City Arvada State CO Zip Code 80007

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4030633

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Peter Paul Luce

Mailing Address 61 Charlou Circle

City Englewood State CO Zip Code 80111

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2006

Transaction ID: C4030713

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Gladys G Cofrin

Mailing Address 2615 NW 22nd Drive

City Gainesville State FL Zip Code 32605

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4030993

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1275.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Tim Gablehouse		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2006
Mailing Address PO Box 536		<b>Transaction ID:</b> C4028083
City State Zip Code Tabernash CO 80478-0536	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Gablehouse&Epel LLC	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Paula P Bernstein, PhD		Date of Receipt M M / D D / Y Y Y Y Y 07 / 21 / 2006
Mailing Address 4900 Cherry Creek South Drive Suite D		<b>Transaction ID:</b> C4028223
City State Zip Code Denver CO 80246-2283	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self	Occupation Clinical Psychologist	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Audrey Benedict		Date of Receipt M M / D D / Y Y Y Y Y 07 / 20 / 2006
Mailing Address 8297 Overland Road		<b>Transaction ID:</b> C4028263
City State Zip Code Ward CO 80481-9532	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self	Occupation Writer	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 124
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas Richardson

Mailing Address 1063 25 Road

City State Zip Code  
Grand Junction CO 81505-1008

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 24 / 2006

**Transaction ID:** C4028463

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Carey Lovelace

Mailing Address 105 Duane Street  
Apt 40E

City State Zip Code  
New York NY 10013

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Self

Occupation  
Writer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

**Transaction ID:** C4034143

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert F Hartsook

Mailing Address 12 North Channel Drive

City State Zip Code  
Wrightsville Beach NC 28480

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hartsook Companies Inc.

Occupation  
Chairman & CEO

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

**Transaction ID:** C4031023

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Elinor J Chinn

Mailing Address 3131 E Horsetooth Road

City State Zip Code  
Fort Collins CO 80525-9624

FEC ID number of contributing federal political committee. **C**

Name of Employer Organic Cabinet Co. Occupation Payroll

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2006

**Transaction ID:** C4030674

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Helen C. Shreves

Mailing Address 1299 Gilpin St. Apt 7E

City State Zip Code  
Denver CO 80218-2555

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2006

**Transaction ID:** C4030704

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Sara Morgan

Mailing Address 2121 Kirby Drive #99

City State Zip Code  
Houston TX 70019

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

**Transaction ID:** C4031084

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charles Ansbacher</p> <p>Mailing Address 168 Brattle St.</p> <p>City State Zip Code Cambridge MA 02138</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation BOSTON SYMPHONY ORCHESTRA Conductor</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  Debt PrimaryPrimary</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 24 / 2006</p> <p><b>Transaction ID:</b> C4042014</p> <p>Amount of Each Receipt this Period 400.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Patricia McConathy</p> <p>Mailing Address 225 Wall Street #250</p> <p>City State Zip Code Vail CO 81657</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation N/A Homemaker</p> <p>Receipt For: 2006  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2100.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 02 / 2006</p> <p><b>Transaction ID:</b> C4031894</p> <p>Amount of Each Receipt this Period 1700.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Doug Smith</p> <p>Mailing Address 3314 S. Ammons Street #2-203</p> <p>City State Zip Code Lakewood CO 80227</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Swedish Medical Center RN</p> <p>Receipt For: 2006  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 555.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 27 / 2006</p> <p><b>Transaction ID:</b> C4032294</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><b>2150.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Nick Bush</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006
Mailing Address 12922 West Virginia Drive		Transaction ID: C4028264
City State Zip Code Lakewood CO 80228	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Stonewall Democrats Membership Chair	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Price</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2006
Mailing Address 765 10th Street		Transaction ID: C4028274
City State Zip Code Boulder CO 80302-7508	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation NA Retired	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Stasia W Davison</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2006
Mailing Address 5 Tamarac Lane		Transaction ID: C4030694
City State Zip Code Englewood CO 80113-4920	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation NA Retired	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	_____



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Rosalind S. Abernathy

Mailing Address 230 Kings Row Drive

City State Zip Code  
Little Rock AR 72207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Univ. of Arkansas Physician

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2006

Transaction ID: C4030655

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary Alyce Driver

Mailing Address 6500 Whaley Dr

City State Zip Code  
Boulder CO 80303-4338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Travelopathy Consultant

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2006

Transaction ID: C4030665

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marilyn Monter

Mailing Address 421 Berry Hill Road

City State Zip Code  
Syosset NY 11791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Holiday Management Associates, Inc. Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 28 / 2006

Transaction ID: C4030715

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Pam Grissom		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 7230 Star Fury Place		Transaction ID: C4030975
City Tucson State AZ Zip Code 85718	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NA Occupation Not Employed		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Julane L. Katz		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 7300 Dearwester Dr Unit 124		Transaction ID: C4031025
City Cincinnati State OH Zip Code 45236	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NA Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C.</b> C. Diane Matt		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006
Mailing Address 1435 South Elm Street		Transaction ID: C4031855
City Denver State CO Zip Code 80222	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer WePan Occupation Executive Director		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Patricia McConathy

Mailing Address 225 Wall Street #250

City State Zip Code  
Vail CO 81657

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2006

Transaction ID: C4031895

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ronald Allred

Mailing Address 121 Yellow Brick Rd

City State Zip Code  
Telluride CO 81435-9536

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Investor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2006

Transaction ID: C4032355

Amount of Each Receipt this Period  
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Theresa A Tomich

Mailing Address 12264 W Applewood Knolls Drive

City State Zip Code  
Lakewood CO 80215

FEC ID number of contributing federal political committee. **C**

Name of Employer Social Security Administration Occupation Claims Representative

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1355.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 02 / 2006

Transaction ID: C4032365

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Betty J. Mitchell

Mailing Address 2538 N. Haven Cove

City State Zip Code  
Annapolis MD 21401

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2006

Transaction ID: C4033075

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ellen Beller

Mailing Address 543 Clayton Street

City State Zip Code  
Denver CO 80206-4232

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Artist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2006

Transaction ID: C4028085

Amount of Each Receipt this Period  
700.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mary Jarvis

Mailing Address 10751 Fairway Vistas Ct

City State Zip Code  
Littleton CO 80125

FEC ID number of contributing federal political committee. **C**

Name of Employer Cherokee Trail High School Occupation Principle

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2006

Transaction ID: C4028215

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Katharine Bard Dickson

Mailing Address 101 Ash Street

City State Zip Code  
Denver CO 80220

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ARTIST

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 850.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2006

Transaction ID: C4028295

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dick Monfort

Mailing Address 3519 Holman Ct

City State Zip Code  
Greeley CO 80631-9428

FEC ID number of contributing federal political committee. **C**

Name of Employer Colorado Rockies Occupation Executive

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2006

Transaction ID: C4033705

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jerome Baum

Mailing Address 22 Dory Court

City State Zip Code  
Bluffton SC 29909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2006

Transaction ID: C4033765

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ruth Lynn Craig, M.D.

Mailing Address 5 Bell Waver Way

City State Zip Code  
Oakland CA 94619

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician/Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 20 / 2006

Transaction ID: C4028265

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Scott C. Sandberg

Mailing Address 608 Cook Street

City State Zip Code  
Denver CO 80206

FEC ID number of contributing federal political committee. **C**

Name of Employer Snell & Wilmer, L.L.P. Occupation Attorney at Law

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4030635

Amount of Each Receipt this Period  
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Glenn Waller

Mailing Address 17138 E. Dorado Cr.

City State Zip Code  
Aurora CO 80015-3018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: C4036495

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Scott C. Sandberg

Mailing Address 608 Cook Street

City State Zip Code  
Denver CO 80206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Snell & Wilmer, L.L.P. Attorney at Law

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4030626

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Margaret Carson

Mailing Address 2920 Juilliard Street

City State Zip Code  
Boulder CO 80305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sun Micro Engineer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4030636

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Stewart A. Levin

Mailing Address 8831 East Easter Place

City State Zip Code  
Centennial CO 80112-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Landmark Graphics Geophysicist

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1061.50

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2006

Transaction ID: C4030706

Amount of Each Receipt this Period  
125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Janet Margolin

Mailing Address 10 Hanken Drive

City State Zip Code  
Kentfield CA 94904

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4030986

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kenneth Gordon

Mailing Address 566 Rampart Way

City State Zip Code  
Denver CO 80230

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Colorado Occupation State Senator

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4030996

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Brad Farber

Mailing Address 75 Sedgwick Place

City State Zip Code  
Englewood CO 80110

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Student

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4031006

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Buck Blessing

Mailing Address 102 N Cascade Ave  
5th Floor

City State Zip Code  
Colorado Springs CO 80903-1458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Griffis/Blessing Inc. Real Estate

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2096.44

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2006

**Transaction ID:** C4036506

Amount of Each Receipt this Period  
140.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Brooke Banbury

Mailing Address 1301 16th St

City State Zip Code  
Denver CO 80202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Debt Primary 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2006

**Transaction ID:** C4079586

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Scott D Coors

Mailing Address 21554 Mountsfield Dr

City State Zip Code  
Golden CO 80439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coors Brewing Company/Management

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

**Transaction ID:** C4031486

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1390.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Marvin Yust		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006	
Mailing Address 2050 Gaylord Street		<b>Transaction ID:</b> C4031856	
City State Zip Code Denver CO 80205		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer KKZN Radio		Occupation Talk Show Host	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 650.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Pat McConathy		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2006	
Mailing Address 225 Wall Street #250		<b>Transaction ID:</b> C4031896	
City State Zip Code Vail CO 81657		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self		Occupation Investor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Bryant		Date of Receipt M M / D D / Y Y Y Y 08 / 03 / 2006	
Mailing Address 2000 E 12th Avenue Unit 30		<b>Transaction ID:</b> C4032916	
City State Zip Code Denver CO 80206-2824		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Elizabeth A. Bryant, P.C.		Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Douglas J. Friednash

Mailing Address 1700 Lincoln St  
#2400

City State Zip Code  
Denver CO 80203-4524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fairfield & Woods PC Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4033056

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Geraldine Karetzky

Mailing Address PO Box 12385

City State Zip Code  
Aspen CO 81612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4033066

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ellen Beller

Mailing Address 543 Clayton Street

City State Zip Code  
Denver CO 80206-4232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self Artist

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: C4028086

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Janet Mackenzie

Mailing Address 278 S Milwaukee St

City State Zip Code  
Denver CO 80209-3216

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 22 / 2006

**Transaction ID: C4028216**

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Paul Lilly

Mailing Address 1325 S Pitkin Ave

City State Zip Code  
Superior CO 80027-8131

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 24 / 2006

**Transaction ID: C4028466**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Evan F Dreyer

Mailing Address 2702 Alton St

City State Zip Code  
Denver CO 80238-2681

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Communications Consultant

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

**Transaction ID: C4029226**

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Gene Bolles</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2006	
Mailing Address 7861 N 41st Street		<b>Transaction ID: C4029606</b>	
City State Zip Code Longmont CO 80503		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Denver Health Medical Center/CU Health	Occupation Neurosurgeon		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Donna Alengi</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2006	
Mailing Address 225 E 16th Ave Ste 1000		<b>Transaction ID: C4030627</b>	
City State Zip Code Denver CO 80203-1614		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Special District Assc. Of Colorado	Occupation Deputy Director		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 575.00		

Full Name (Last, First, Middle Initial) <b>C. Albert A. Chambers</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2006	
Mailing Address 3499 Windisch Avenue		<b>Transaction ID: C4030647</b>	
City State Zip Code Cincinnati OH 45208		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer University Radiology Associates of Cin	Occupation Radiologist		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Edmond D Johnson

Mailing Address 1551 Sunset St  
Suite 13

City Longmont State CO Zip Code 80501

FEC ID number of contributing federal political committee. **C**

Name of Employer Premier Manufacturing Occupation Owner

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
850.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 28 / 2006

Transaction ID: C4030727

Amount of Each Receipt this Period  
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Betty J. Mitchell

Mailing Address 2538 N. Haven Cove

City Annapolis State MD Zip Code 21401

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4030987

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ellen H. Powers

Mailing Address 1010 Waltham Street  
Apt. F24

City Lexington State MA Zip Code 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4030997

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Donald S. Dashney

Mailing Address 1515 E. 8th Ave.  
Apt. 1

City State Zip Code  
Denver CO 80203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Stewart-Williams, LLC Designer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: C4031227

Amount of Each Receipt this Period  
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mark A.r. Chalfant

Mailing Address 1030 Katy Lane

City State Zip Code  
Longmont CO 80504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
US Government Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 01 / 2006

Transaction ID: C4031847

Amount of Each Receipt this Period  
75.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
David Powell

Mailing Address 8921 E. 29th Ave.

City State Zip Code  
Denver CO 80238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Brownstein Hyatt Farber Attorney

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 02 / 2006

Transaction ID: C4032687

Amount of Each Receipt this Period  
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2325.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Arthur Victor, II

Mailing Address 3751 South Gilpin Street

City Englewood State CO Zip Code 80113

FEC ID number of contributing federal political committee. **C**

Name of Employer Minibrook LLP Occupation Real Estate

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
08 / 03 / 2006

Transaction ID: C4032917

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Blair Hull

Mailing Address 141 West Jackson Blvd. Suite 340

City Chicago State IL Zip Code 60604

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Investor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt  
07 / 21 / 2006

Transaction ID: C4028087

Amount of Each Receipt this Period  
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bonnie S. Margolin

Mailing Address 3204 South Elmira Court

City Denver State CO Zip Code 80231

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 204.00

Date of Receipt  
07 / 22 / 2006

Transaction ID: C4028217

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2350.00

**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Patricia P. Voelz

Mailing Address 3055 Bentwater Drive

City State Zip Code  
Montgomery TX 77356

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 230.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2006

Transaction ID: C4028277

Amount of Each Receipt this Period  
30.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Davis

Mailing Address 32601 Buffalo PK Rd

City State Zip Code  
Evergreen CO 80439

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2006

Transaction ID: C4028287

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marjorie E. Vanek

Mailing Address 10241 York Road

City State Zip Code  
N. Royalton OH 44133

FEC ID number of contributing federal political committee. **C**

Name of Employer Cuyahoga Cty. Pub. Lib. Occupation Library Clerk

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Debt Primary Primary 275.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2006

Transaction ID: C4042007

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **355.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Matthew Wasserman</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2006	
Mailing Address 1470 S Grape St		<b>Transaction ID: C4030638</b>	
City State Zip Code Denver CO 80222-3554	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Occupation Consultant	Election Cycle-to-Date 400.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Patricia McConathy</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2006	
Mailing Address 225 Wall Street #250		<b>Transaction ID: C4030648</b>	
City State Zip Code Vail CO 81657	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer N/A Occupation Homemaker	Election Cycle-to-Date 2100.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. John R Bermingham</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2006	
Mailing Address 601 Franklin St		<b>Transaction ID: C4030658</b>	
City State Zip Code Denver CO 80218-3625	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NA Occupation Retired	Election Cycle-to-Date 600.00		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> John Samuel Fitch		Date of Receipt MM / DD / YYYY 07 / 28 / 2006
Mailing Address 345 17th Street		<b>Transaction ID:</b> C4030728
City Boulder	State CO	Zip Code 80302
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer University of Colorado	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark A.r. Chalfant		Date of Receipt MM / DD / YYYY 07 / 31 / 2006
Mailing Address 1030 Katy Lane		<b>Transaction ID:</b> C4031018
City Longmont	State CO	Zip Code 80504
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer US Government	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1025.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Caroline L Corkey		Date of Receipt MM / DD / YYYY 08 / 01 / 2006
Mailing Address 2101 S Blackhawk St Ste 250		<b>Transaction ID:</b> C4031488
City Aurora	State CO	Zip Code 80014-1475
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Clinical Social Worker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alan B. Cooper

Mailing Address 75 Jasmine Street

City State Zip Code  
Denver CO 80220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Denver Nephrologists PC Physician

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

**Transaction ID:** C4032368

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Beverly B Noun

Mailing Address 2675 Winding Trail Dr

City State Zip Code  
Boulder CO 80304-1453

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Real Estate Consultant

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

2100.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

**Transaction ID:** C4032668

Amount of Each Receipt this Period  
900.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Joanne Johnson

Mailing Address 1965 Forest Pkwy

City State Zip Code  
Denver CO 80220-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Colorado Trust Controller

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

225.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

**Transaction ID:** C4032688

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 45 / 124
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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Carl Eklund Mailing Address 323 High St City State Zip Code Denver CO 80218-4021 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C4032828 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	6														
500.00																							
Name of Employer Occupation Ballard Spahr Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td style="text-align: right;">1500.00</td> </tr> </table>	1500.00																				
1500.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Carolyn A Meske Mailing Address 20475 E Euclid Lane City State Zip Code Aurora CO 80016-2357 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C4032918 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	6														
100.00																							
Name of Employer Occupation Atlantic Trust Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td style="text-align: right;">400.00</td> </tr> </table>	400.00																				
400.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Colleen Andrus Mailing Address 13205 Resort Drive City State Zip Code Conifer CO 80433 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C4028088 Amount of Each Receipt this Period <table border="1"> <tr> <td style="text-align: right;">1600.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	1		2	0	0	6	1600.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	1		2	0	0	6														
1600.00																							
Name of Employer Occupation NA Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td style="text-align: right;">1600.00</td> </tr> </table>	1600.00																				
1600.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alice P. Neuhauser

Mailing Address 1466 11th Street

City State Zip Code  
Manhattan Beach CA 90266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Kushner-Locke Company Executive

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 20 / 2006

**Transaction ID:** C4028268

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Brandon P Hull

Mailing Address 744 Detroit Street

City State Zip Code  
Denver CO 80206-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Overturf & McGeth, P.C. Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

**Transaction ID:** C4030628

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Eric Blank

Mailing Address 1750 Bear Mountain Drive

City State Zip Code  
Boulder CO 80303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Community Energy Corporation Executive

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 315.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

**Transaction ID:** C4029218

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 47 / 124
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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Roger Gerry Hallowell Mailing Address 115 N Calle Resplendor City Tucson State AZ Zip Code 85716 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2006 <b>Transaction ID: C4029228</b> Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mary Ellen Wolf Mailing Address 5574 S Kenton Court City Englewood State CO Zip Code 80111 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2006 <b>Transaction ID: C4029628</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer CBS Outdoor Occupation Creative Director Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 560.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Don Martin Mailing Address 321D N. San Remo Place City Tucson State AZ Zip Code 85715 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2006 <b>Transaction ID: C4030679</b> Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Competitive Engineering Occupation Businessman Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 48 / 124
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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Jessica Sherwood		Date of Receipt MM / DD / YYYY 07 / 26 / 2006
Mailing Address 1325 Milwaukee Street		Transaction ID: C4030629
City State Zip Code Denver CO 80206	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 225.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) <b>B.</b> Michael Bonino		Date of Receipt MM / DD / YYYY 07 / 27 / 2006
Mailing Address 1360 Walnut Street #203		Transaction ID: C4030659
City State Zip Code Boulder CO 80302	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer Stammler Porsche Audi Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Sales Manager Election Cycle-to-Date ▼ 450.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) <b>C.</b> William Reynolds		Date of Receipt MM / DD / YYYY 07 / 28 / 2006
Mailing Address 1800 Broadway St. Ste. 210		Transaction ID: C4030669
City State Zip Code Boulder CO 80305-5234	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer WW Reynolds Co. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	425.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 124
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A.</b> Elaine A. Blechman		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2006
Mailing Address 220 Green Rock Dr		Transaction ID: C4030689
City State Zip Code Boulder CO 80302-4705	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Prosocial Applications Inc	Occupation CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Carol Burkhart		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2006
Mailing Address 2733 19th Street		Transaction ID: C4030729
City State Zip Code Greeley CO 80634-5701	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NA	Occupation Community Volunteer	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Toby Devan Lewis		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2006
Mailing Address 427 N. 6 St		Transaction ID: C4030999
City State Zip Code Aspen CO 81611	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Progressive Auto Insurance	Occupation Art Curator	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
James Martin

Mailing Address 1030 Katy Lane

City State Zip Code  
Longmont CO 80504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Western Resources Advocates Lawyer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 31 2006

Transaction ID: C4031009

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Susan Sarandon

Mailing Address P.O. Box 1218

City State Zip Code  
New York NY 10113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Actress

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Debt Primary 1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 20 2006

Transaction ID: C4079629

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael-Ann Herring

Mailing Address PO Box 2102

City State Zip Code  
Telluride CO 81435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Consultant

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 02 2006

Transaction ID: C4032679

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
David L Friedman

Mailing Address 15833 E Purdue Dr

City Aurora State CO Zip Code 80013-2548

FEC ID number of contributing federal political committee. **C**

Name of Employer Sandy River Health System Occupation Chairman

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 860.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 2 / 2 0 0 6

Transaction ID: C4032689

Amount of Each Receipt this Period  
360.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Diane Denish

Mailing Address P.O. Box 30561

City Albuquerque State NM Zip Code 87190

FEC ID number of contributing federal political committee. **C**

Name of Employer State of New Mexico Occupation Lt. Governor

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: C4032919

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Carol Buchanan Lay

Mailing Address 3247 South Dallas Court

City Denver State CO Zip Code 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Northern Trust Bank Occupation Trust Banking

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 6

Transaction ID: C4033709

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	710.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Peter R Decker

Mailing Address 6748 State Highway 62

City State Zip Code  
Ridgway CO 81432

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Writer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

Transaction ID: C4032369

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lisa B Carlson

Mailing Address 1334 S Gaylord Street

City State Zip Code  
Denver CO 80210-2339

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ. of Colorado - Grad. Sch. Of Publ Occupation  
Executive Director

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4029609

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jesse W. Kehres

Mailing Address 8 Classic Circle

City State Zip Code  
Madison WI 53719

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation  
Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4074070A

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4074070AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Ellen R. Malcolm

Mailing Address 5060 Linnean Ave. NW

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
EMILY's List President

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074051A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074051AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Thomas E. Leggat

Mailing Address 81 Baker Bridge Road

City Lincoln State MA Zip Code 01773

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2006

Transaction ID: C4074071A

Amount of Each Receipt this Period  
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2006

Transaction ID: C4074071AB

Amount of Each Receipt this Period  
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Lisa J. Kutner

Mailing Address 4040 Sunset Road

City San Diego State CA Zip Code 92103

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation Physician

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2006

Transaction ID: C4074052A

Amount of Each Receipt this Period  
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: C4074052AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Robert C. West

Mailing Address 305 Nautilus Drive

City Madison State WI Zip Code 53705

FEC ID number of contributing federal political committee. **C**

Name of Employer professor Occupation  
Univ. of Wisconsin

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074072A

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074072AB

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 200.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Richard J. Stuckey

Mailing Address 1931 N. Fremont Street

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 6

Transaction ID: C4074192A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 6

Transaction ID: C4074192AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Sheryl G. Rosenfield

Mailing Address 13611 Deering Bay Drive  
Apt. 901

City State Zip Code  
Coral Gables FL 33158

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rosenfield & Associates Inc. business

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4074232A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4074232AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Lynn T. Landmesser

Mailing Address 3197 Warrington Road

City Shaker Heights State OH Zip Code 44120

FEC ID number of contributing federal political committee. **C**

Name of Employer Case Western Reserve University Occupation Professor

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: C4074282A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: C4074282AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jamie G. R. Wolf

Mailing Address 812 North Foothill Road

City State Zip Code  
Beverly Hills CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Freelance Writer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2006

Transaction ID: C4074213A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2006

Transaction ID: C4074213AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Jane B. Williams

Mailing Address 27 Nickerson Road

City State Zip Code  
Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation  
Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 03 / 2006

Transaction ID: C4074184A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: C4074184AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Ellen L Moran

Mailing Address 3106 Cummings Lane

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
EMILY's List Executive Director

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 6

Transaction ID: C4074254A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 6

Transaction ID: C4074254AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Katharine B. Mountcastle

Mailing Address 37 Oenoke Lane

City State Zip Code  
New Canaan CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074095A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2006

Transaction ID: C4074095AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Marjorie P. Love

Mailing Address 2442 17th Avenue

City State Zip Code  
Carmel CA 93923

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2006

Transaction ID: C4074086A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 124  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 21 / 2006

Transaction ID: C4074086AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Todd Evans

Mailing Address 2086 East Lake Road

City State Zip Code  
Atlanta GA 30307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Teacher

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

Transaction ID: C4074206A

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

Transaction ID: C4074206AB

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Hal C. Reed

Mailing Address 144 Orchard Hill Drive

City State Zip Code  
South Windsor CT 06074

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
University of Connecticut Development Officer  
Foundation

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 505.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 6

Transaction ID: C4074216A

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 6

Transaction ID: C4074216AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Susan Sonnenfeld

Mailing Address P.O. Box 3222

City State Zip Code  
East Hampton NY 11937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sonnenfeld Production, Inc. Film Production

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 0 4 / 2 0 0 6

Transaction ID: C4074256A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 124
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2006

Transaction ID: C4074256AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Hersh Markusfeld

Mailing Address 5 Walden Lane

City Mill Valley State CA Zip Code 94941

FEC ID number of contributing federal political committee. **C**

Name of Employer Senior Health Management Corp. Occupation CEO

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4074037A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
MM / DD / YYYY  
07 / 26 / 2006

Transaction ID: C4074037AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Charles E. Haley

Mailing Address 15426 W. Fairmount Avenue

City State Zip Code  
Goodyear AZ 85338

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: C4074137A

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: C4074137AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Gail D. Reinhart

Mailing Address 2121 Jamieson Avenue # 1806

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. gov't Occupation Lawyer

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4074048A

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2006

Transaction ID: C4074048AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
Marietta M. Ethier

Mailing Address 5630 Wisconsin Avenue #605

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

Transaction ID: C4074169A

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution:  
See Below

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 04 / 2006

Transaction ID: C4074169AB

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 124
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Cornelia Weiss

Mailing Address 578 Society Drive

City State Zip Code  
Telluride CO 81435

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Weiss Law Firm L.L.C. Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 03 / 2006

Transaction ID: C4074229A

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 03 / 2006

Transaction ID: C4074229AB

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
Christopher H. Lutz

Mailing Address 75 Richdale Avenue, # 15

City State Zip Code  
Cambridge MA 02140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Plumsock Mesóamerican Studies Editor/unsalaried

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: C4074249A

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 124
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation  
Conduit total: 17,782.50

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 07 / 2006

Transaction ID: C4074249AB

Amount of Each Receipt this Period  
.....1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	.....0.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	.....70059.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 124  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2200.02

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	4	/	2	0	0	6

Transaction ID: C4028450

Amount of Each Receipt this Period  
1436.34

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: staff & travel costs

**B.** Full Name (Last, First, Middle Initial)  
John Salazar for Congress

Mailing Address PO Box 534

City State Zip Code  
Pueblo CO 81002

FEC ID number of contributing federal political committee. **C** C00393033

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	9	/	2	0	0	6

Transaction ID: C4079641

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2200.02

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	6	/	2	0	0	6

Transaction ID: C4029501

Amount of Each Receipt this Period  
384.34

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: staff

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2820.68**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 69 / 124</span>
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
EMILY's List

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00193433

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2200.02

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	6

**Transaction ID:** C4030392

Amount of Each Receipt this Period  

379.34
--------

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: staff & staff travel

**B.** Full Name (Last, First, Middle Initial)  
Diana Degette for Congress

Mailing Address P.O. Box 61337

City Denver State CO Zip Code 80206-8337

FEC ID number of contributing federal political committee. **C** C00311639

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	7	/	2	0	0	6

**Transaction ID:** C4079596

Amount of Each Receipt this Period  

500.00
--------

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>879.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3700.02</b>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 124
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
State Farm

Mailing Address 900 E Louisiana Avenue  
Suite 105

City State Zip Code  
Denver CO 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
332.65

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2006

**Transaction ID:** C4079631

Amount of Each Receipt this Period  
332.65

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Qwest

Mailing Address Business Services  
PO Box 856169

City State Zip Code  
Louisville KY 40285-6169

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
901.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2006

**Transaction ID:** C4079614

Amount of Each Receipt this Period  
486.02

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Qwest

Mailing Address Business Services  
PO Box 856169

City State Zip Code  
Louisville KY 40285-6169

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
901.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2006

**Transaction ID:** C4079599

Amount of Each Receipt this Period  
415.97

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1234.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1234.64

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Matthew Kazan</b>		<b>Transaction ID:</b> D166230 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 2607 S Williams Street		Amount of Each Disbursement this Period 1567.00
City Denver State CO Zip Code 80210	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kyle Alcorn</b>		<b>Transaction ID:</b> D166270 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 802 University Avenue Apt B		Amount of Each Disbursement this Period 123.95
City Boulder State CO Zip Code 80302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Alexander Czernick</b>		<b>Transaction ID:</b> D166280 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 2631 S Yarrow Street		Amount of Each Disbursement this Period 351.56
City Lakewood State CO Zip Code 80227	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2042.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Nicole Hanlen</p>		<p><b>Transaction ID:</b> D166510 <b>Date of Disbursement</b> 08 / 01 / 2006</p>	
<p>Mailing Address 1206 E.101St. Ave.</p>		<p>Amount of Each Disbursement this Period 223.95</p>	
<p>City Thornton State CO Zip Code 80229</p>	<p>Purpose of Disbursement Payroll</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>B.</b> Full Name (Last, First, Middle Initial) Jessica O'Connell</p>		<p><b>Transaction ID:</b> D166530 <b>Date of Disbursement</b> 08 / 01 / 2006</p>	
<p>Mailing Address 6225 W 75th Place</p>		<p>Amount of Each Disbursement this Period 1269.50</p>	
<p>City Arvada State CO Zip Code 80003</p>	<p>Purpose of Disbursement Payroll</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>C.</b> Full Name (Last, First, Middle Initial) Colorado State Archives</p>		<p><b>Transaction ID:</b> D166540 <b>Date of Disbursement</b> 08 / 01 / 2006</p>	
<p>Mailing Address 1313 Sherman RM 1b-20</p>		<p>Amount of Each Disbursement this Period 247.00</p>	
<p>City Denver State CO Zip Code 80203</p>	<p>Purpose of Disbursement Records/Research</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1740.45</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. RBI Strategy &amp; Research</b>		<b>Transaction ID:</b> D166760 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 1900 Grant Street Suite 1170		Amount of Each Disbursement this Period 1500.00
City Denver State CO Zip Code 80203	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Compliance Consulting		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Frontier Business Products</b>		<b>Transaction ID:</b> D162570 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 6
Mailing Address 700 W 48th Avenue		Amount of Each Disbursement this Period 182.18
City Denver State CO Zip Code 80216	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement equipment rental		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Anthem Blue Cross Blue Shield</b>		<b>Transaction ID:</b> D162580 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 700 Broadway		Amount of Each Disbursement this Period 156.10
City Denver State CO Zip Code 80273	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement health insurance		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1838.28
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Timothy Klee</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 31715 W Alaska Place</p> <p>City Lakewood State CO Zip Code 80228</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166231</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1025.20"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. William Overhults</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 2535 E Asbury Avenue #7</p> <p>City Denver State CO Zip Code 80210</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166291</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="191.28"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Ariana Wolf</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5574 S. Kenton Ct.</p> <p>City Centennial State CO Zip Code 80111</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166301</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1434.30"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>2650.78</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Brian Johnson</b>		<b>Transaction ID: D166521</b> Date of Disbursement 08 / 01 / 2006
Mailing Address 1596 Arapahoe Street		Amount of Each Disbursement this Period 380.94
City Strasburg State CO Zip Code 80136	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nicole Hanlen</b>		<b>Transaction ID: D166551</b> Date of Disbursement 08 / 01 / 2006
Mailing Address 1206 E.101St. Ave.		Amount of Each Disbursement this Period 65.87
City Thornton State CO Zip Code 80229	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement staff travel- food Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Transfirst</b>		<b>Transaction ID: D166761</b> Date of Disbursement 09 / 11 / 2006
Mailing Address Colorado Business Bank c/o Transfi 371 Centennial Parkway		Amount of Each Disbursement this Period 246.08
City Louisville State CO Zip Code 80027	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Credit Card Processing Fee Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>692.89</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Geary Interactive</b>		<b>Transaction ID:</b> D162571 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 6
Mailing Address 450 B Street 9th Floor		Amount of Each Disbursement this Period 750.86
City San Diego State CA Zip Code 92101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement web hosting & fees Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Murphy Putnam Shorr &amp; Partners LLC</b>		<b>Transaction ID:</b> D166222 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 6
Mailing Address 901 N Washington Street Suite 400		Amount of Each Disbursement this Period 150000.00
City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Media Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jedediah Ober</b>		<b>Transaction ID:</b> D166232 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 4560 Arapahoe Ave #C		Amount of Each Disbursement this Period 1633.25
City Boulder State CO Zip Code 80303	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	152384.11
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Brandon Pulling</b>		<b>Transaction ID:</b> D166292 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 1591 W 133rd Avenue		Amount of Each Disbursement this Period 353.10
City Thornton State CO Zip Code 80241	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kirstin McLean</b>		<b>Transaction ID:</b> D166302 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 3954 Winona Ct.		Amount of Each Disbursement this Period 321.84
City Denver State CO Zip Code 80212	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Kathryn Poindexter</b>		<b>Transaction ID:</b> D166532 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 1041 Ogden Street #402		Amount of Each Disbursement this Period 555.27
City Denver State CO Zip Code 80218	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1230.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Jedediah Ober</b> Full Name (Last, First, Middle Initial) Mailing Address 4560 Arapahoe Ave #C City Boulder State CO Zip Code 80303 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166662</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Amount of Each Disbursement this Period 184.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Ms. Peggy Lamm</b> Full Name (Last, First, Middle Initial) Mailing Address 6444 Simms #132 City Arvada State CO Zip Code 80004 Purpose of Disbursement Candidate Travel Candidate Name Peggy Lamm Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D167152</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 700.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. American Express</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D167182</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 26.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	912.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Bank Of America, N.A.</b>		<b>Transaction ID:</b> D167372
Mailing Address PO Box 25118		Date of Disbursement 09 / 01 / 2006
City Tampa	State FL	Zip Code 33622-5118
Purpose of Disbursement merchant fees	Category/ Type	Amount of Each Disbursement this Period 386.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Timothy Klee</b>		<b>Transaction ID:</b> D162572
Mailing Address 31715 W Alaska Place		Date of Disbursement 08 / 06 / 2006
City Lakewood	State CO	Zip Code 80228
Purpose of Disbursement staff travel	Category/ Type	Amount of Each Disbursement this Period 27.29
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EMILY's List</b>		<b>Transaction ID:</b> D159952
Mailing Address 1120 Connecticut Avenue NW Ste 1100		Date of Disbursement 07 / 24 / 2006
City Washington	State DC	Zip Code 20036
Purpose of Disbursement staff & travel costs	Category/ Type	Amount of Each Disbursement this Period 1436.34
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* in-kind received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1849.63</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Colorado Business Bank</b>		<b>Transaction ID:</b> D166223 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 821 17th Street		Amount of Each Disbursement this Period 8.00
City Denver State CO Zip Code 80202	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Wire Transfer Fee	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jessica O'Connell</b>		<b>Transaction ID:</b> D166233 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 6225 W 75th Place		Amount of Each Disbursement this Period 4265.92
City Arvada State CO Zip Code 80003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lee Carpenter</b>		<b>Transaction ID:</b> D166273 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 18703 W Campus Road		Amount of Each Disbursement this Period 315.22
City Golden State CO Zip Code 80401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4589.14</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Kathleen Rivenbark</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 9741 N King Way</p> <p>City Westminster State CO Zip Code 80031</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166293</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="578.87"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Michael Reinhart</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 10609 Bellaire St.</p> <p>City Thornton State CO Zip Code 80233</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166303</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="440.22"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Hunterdon LLC</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 12161 Sheridan Blvd. D120</p> <p>City Broomfield State CO Zip Code 80020</p> <p>Purpose of Disbursement Management Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166623</b></p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="14"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="3519.09"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Kelly Hogan</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1165 Pennsylvania Street #3c</p> <p>City Denver State CO Zip Code 80203</p> <p>Purpose of Disbursement staff travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D162573</b></p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="87.82"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>B. State Farm</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 900 E Louisiana Avenue Suite 105</p> <p>City Denver State CO Zip Code 80210</p> <p>Purpose of Disbursement liability insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D160453</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="376.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>C. Alejandra Duarte</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1814 Smith Road</p> <p>City Charleston State WV Zip Code 25314</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166283</b></p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="240.26"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>704.08</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Hunterdon LLC</b>		<b>Transaction ID: D167153</b> Date of Disbursement 08 / 01 / 2006
Mailing Address 12161 Sheridan Blvd. D120		Amount of Each Disbursement this Period 5000.00
City Broomfield State CO Zip Code 80020	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Management Consulting Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bank Of America, N.A.</b>		<b>Transaction ID: D167373</b> Date of Disbursement 09 / 15 / 2006
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 231.28
City Tampa State FL Zip Code 33622-5118	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement account fees Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Qwest</b>		<b>Transaction ID: D160454</b> Date of Disbursement 07 / 25 / 2006
Mailing Address Business Services PO Box 856169		Amount of Each Disbursement this Period 740.68
City Louisville State KY Zip Code 40285-6169	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement local phone service Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5971.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Table Steaks</b> Full Name (Last, First, Middle Initial) Mailing Address 1931 Sheridan Boulevard City Edgewater State CO Zip Code 80214 Purpose of Disbursement event food Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D160494</b> Date of Disbursement 07 / 21 / 2006 Amount of Each Disbursement this Period 145.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

<b>B. Brittany Ross</b> Full Name (Last, First, Middle Initial) Mailing Address 5511 W 38th Avenue City Wheat Ridge State CO Zip Code 80212 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D166264</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 1997.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Luke Goodwin</b> Full Name (Last, First, Middle Initial) Mailing Address 1372 Balsam Avenue City Boulder State CO Zip Code 80304 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		<b>Transaction ID: D166284</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 321.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2463.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Axis Commercial Realty</b>		<b>Transaction ID:</b> D166554 Date of Disbursement
Mailing Address 2460 W 26th Avenue Suite 300C		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City Denver	State CO	Zip Code 80211
Purpose of Disbursement Rent		Amount of Each Disbursement this Period <input type="text" value="1470.13"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Transfirst</b>		<b>Transaction ID:</b> D166654 Date of Disbursement
Mailing Address Colorado Business Bank c/o Transfi 371 Centennial Parkway		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City Louisville	State CO	Zip Code 80027
Purpose of Disbursement Portal Transfer Fee		Amount of Each Disbursement this Period <input type="text" value="10.81"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. Transfirst</b>		<b>Transaction ID:</b> D166764 Date of Disbursement
Mailing Address Colorado Business Bank c/o Transfi 371 Centennial Parkway		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>
City Louisville	State CO	Zip Code 80027
Purpose of Disbursement POS Portal		Amount of Each Disbursement this Period <input type="text" value="10.81"/>
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1491.75"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Office Depot</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 600 E Colfax</p>		<p><b>Transaction ID:</b> D167154 <b>Date of Disbursement</b> 08 / 11 / 2006</p>
<p>City Denver State CO Zip Code 80203</p>	<p>Purpose of Disbursement Supplies</p>	<p>Amount of Each Disbursement this Period 37.83</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p><b>B. Colorado Business Bank</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 821 17th Street</p>		<p><b>Transaction ID:</b> D167184 <b>Date of Disbursement</b> 08 / 09 / 2006</p>
<p>City Denver State CO Zip Code 80202</p>	<p>Purpose of Disbursement Wire Fee</p>	<p>Amount of Each Disbursement this Period 8.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p><b>C. Paychex</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 4400 Kittridge Street Suite 50</p>		<p><b>Transaction ID:</b> D167194 <b>Date of Disbursement</b> 09 / 11 / 2006</p>
<p>City Denver State CO Zip Code 80239</p>	<p>Purpose of Disbursement Payroll Services</p>	<p>Amount of Each Disbursement this Period 722.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>768.49</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> D167374 Date of Disbursement 09 / 05 / 2006
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 86.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Phoenix State AZ Zip Code 85072-3852	Purpose of Disbursement merchant fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kathryn Poindexter</b>		<b>Transaction ID:</b> D162574 Date of Disbursement 08 / 06 / 2006
Mailing Address 1041 Ogden Street #402		Amount of Each Disbursement this Period 76.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80218	Purpose of Disbursement staff travel Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Colorado Business Bank</b>		<b>Transaction ID:</b> D166224 Date of Disbursement 07 / 28 / 2006
Mailing Address 821 17th Street		Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80202	Purpose of Disbursement Bank Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	188.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Colorado Business Bank</b>		<b>Transaction ID:</b> D160495 Date of Disbursement 07 / 25 / 2006
Mailing Address 821 17th Street		Amount of Each Disbursement this Period 15.00
City Denver State CO Zip Code 80202	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement banking supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		<b>Transaction ID:</b> D166225 Date of Disbursement 07 / 31 / 2006
Mailing Address 4400 Kittridge Street Suite 50		Amount of Each Disbursement this Period 316.82
City Denver State CO Zip Code 80239	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Tara Cugelman-McMahon</b>		<b>Transaction ID:</b> D166275 Date of Disbursement 07 / 31 / 2006
Mailing Address 1812 Canyon Boulevard 1B		Amount of Each Disbursement this Period 204.81
City Boulder State CO Zip Code 80302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>536.63</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Cariann Stevens</b> Full Name (Last, First, Middle Initial) Mailing Address 12529 W 77th Place City Arvada State CO Zip Code 80005 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166295</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 276.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Matthew Kazan</b> Full Name (Last, First, Middle Initial) Mailing Address 2607 S Williams Street City Denver State CO Zip Code 80210 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166525</b> Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 445.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Colorado Business Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 821 17th Street City Denver State CO Zip Code 80202 Purpose of Disbursement Wire Transfer Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166545</b> Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 8.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>730.01</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D166575 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6
Mailing Address 4400 Kittridge Street Suite 50		Amount of Each Disbursement this Period 30.50
City Denver State CO Zip Code 80239	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Qwest</b>		<b>Transaction ID:</b> D166615 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address Business Services PO Box 856169		Amount of Each Disbursement this Period 296.10
City Louisville State KY Zip Code 40285-6169	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Local Phone Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. James R Merlino</b>		<b>Transaction ID:</b> D166755 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 1187 Maple Dr		Amount of Each Disbursement this Period 1558.62
City Broomfield State CO Zip Code 80020-1052	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Staff Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1885.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Transaction ID: D167155 Date of Disbursement 08 / 11 / 2006	
Mailing Address Denver Downtown Station		Amount of Each Disbursement this Period 1316.25	
City Denver State CO Zip Code 80202	Purpose of Disbursement Postage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Nicole Hanlen</b>		Transaction ID: D162575 Date of Disbursement 08 / 06 / 2006	
Mailing Address 1206 E.101St. Ave.		Amount of Each Disbursement this Period 65.87	
City Thornton State CO Zip Code 80229	Purpose of Disbursement staff travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Campaign Products of the Rockies</b>		Transaction ID: D166685 Date of Disbursement 08 / 28 / 2006	
Mailing Address PO Box 13365		Amount of Each Disbursement this Period 5208.92	
City Denver State CO Zip Code 80201	Purpose of Disbursement Yard Signs	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6591.04
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Nicole Hanlen</b>		Transaction ID: D166226 Date of Disbursement 07 / 31 / 2006	
Mailing Address 1206 E.101St. Ave.		Amount of Each Disbursement this Period 798.25	
City Thornton State CO Zip Code 80229	Purpose of Disbursement Payroll	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Adam Hayes</b>		Transaction ID: D166286 Date of Disbursement 07 / 31 / 2006	
Mailing Address 3590 Fordham Court		Amount of Each Disbursement this Period 185.44	
City Boulder State CO Zip Code 80305	Purpose of Disbursement Payroll	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Timothy Klee</b>		Transaction ID: D166526 Date of Disbursement 08 / 01 / 2006	
Mailing Address 31715 W Alaska Place		Amount of Each Disbursement this Period 380.94	
City Lakewood State CO Zip Code 80228	Purpose of Disbursement Payroll	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1364.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Brittany Ross</b> Full Name (Last, First, Middle Initial) Mailing Address 5511 W 38th Avenue City Wheat Ridge State CO Zip Code 80212 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166536</b> Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 577.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Brittany Ross</b> Full Name (Last, First, Middle Initial) Mailing Address 5511 W 38th Avenue City Wheat Ridge State CO Zip Code 80212 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166666</b> Date of Disbursement 08 / 18 / 2006 Amount of Each Disbursement this Period 230.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Colorado Business Bank</b> Full Name (Last, First, Middle Initial) Mailing Address 821 17th Street City Denver State CO Zip Code 80202 Purpose of Disbursement Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166686</b> Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 10.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>818.81</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Geary Interactive</b>		<b>Transaction ID:</b> D166756 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 450 B Street 9th Floor		Amount of Each Disbursement this Period 1430.00
City San Diego State CA Zip Code 92101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Web Hosting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. RBI Strategy &amp; Research</b>		<b>Transaction ID:</b> D167156 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 1900 Grant Street Suite 1170		Amount of Each Disbursement this Period 1500.00
City Denver State CO Zip Code 80203	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Compliance Consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Love Enterprises</b>		<b>Transaction ID:</b> D162576 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 3166 W 11th Avenue Court		Amount of Each Disbursement this Period 475.00
City Broomfield State CO Zip Code 80020	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement rent Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3405.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. EMILY's List</b>		<b>Transaction ID:</b> D160527 Date of Disbursement
Mailing Address 1120 Connecticut Avenue NW Ste 1100		<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="26"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20036
Purpose of Disbursement staff	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="384.34"/>	
State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received	

Full Name (Last, First, Middle Initial) <b>B. EMILY's List</b>		<b>Transaction ID:</b> D160667 Date of Disbursement
Mailing Address 1120 Connecticut Avenue NW Ste 1100		<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="28"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City Washington	State DC	Zip Code 20036
Purpose of Disbursement staff & staff travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="379.34"/>	
State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received	

Full Name (Last, First, Middle Initial) <b>C. Kelly Hogan</b>		<b>Transaction ID:</b> D166227 Date of Disbursement
Mailing Address 1165 Pennsylvania Street #3c		<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="31"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="20"/> <input type="text" value="06"/> <input type="text" value="06"/>
City Denver	State CO	Zip Code 80203
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <input type="text" value="3152.33"/>	
State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3916.01"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Kathryn Poindexter</b> Full Name (Last, First, Middle Initial) Mailing Address 1041 Ogden Street #402 City Denver State CO Zip Code 80218 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166237</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 1942.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Matthew Hundley</b> Full Name (Last, First, Middle Initial) Mailing Address 759 S Reed Court Apt C-14 City Lakewood State CO Zip Code 80226 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166287</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 474.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Ariana Wolf</b> Full Name (Last, First, Middle Initial) Mailing Address 5574 S. Kenton Ct. City Centennial State CO Zip Code 80111 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166537</b> Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 414.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2832.18</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		<b>Transaction ID:</b> D166547
Mailing Address 4400 Kittridge Street Suite 50		Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
City Denver	State CO	Zip Code 80239
Purpose of Disbursement Payroll Taxes	Category/ Type	Amount of Each Disbursement this Period 9934.73
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		<b>Transaction ID:</b> D166557
Mailing Address 4400 Kittridge Street Suite 50		Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
City Denver	State CO	Zip Code 80239
Purpose of Disbursement Payroll taxes	Category/ Type	Amount of Each Disbursement this Period 1304.06
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Murphy Putnam Shorr &amp; Partners LLC</b>		<b>Transaction ID:</b> D166757
Mailing Address 901 N Washington Street Suite 400		Date of Disbursement MM / DD / YYYY 09 / 28 / 2006
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media	Category/ Type	Amount of Each Disbursement this Period 2724.99
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>13963.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Murphy Putnam Shorr &amp; Partners LLC</b>		<b>Transaction ID: D167157</b> Date of Disbursement 08 / 14 / 2006
Mailing Address 901 N Washington Street Suite 400		Amount of Each Disbursement this Period 7000.00
City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Media Production	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bank Of America, N.A.</b>		<b>Transaction ID: D167177</b> Date of Disbursement 08 / 01 / 2006
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 479.11
City Tampa State FL Zip Code 33622-5118	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement merchant fees	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Axis Commercial Realty</b>		<b>Transaction ID: D162577</b> Date of Disbursement 08 / 21 / 2006
Mailing Address 2460 W 26th Avenue Suite 300C		Amount of Each Disbursement this Period 1470.13
City Denver State CO Zip Code 80211	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement rent	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>8949.24</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Kelly Hogan</b>		<b>Transaction ID: D166517</b> Date of Disbursement 08 / 01 / 2006
Mailing Address 1165 Pennsylvania Street #3c		Amount of Each Disbursement this Period 910.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80203	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jesse Hogue</b>		<b>Transaction ID: D166228</b> Date of Disbursement 07 / 31 / 2006
Mailing Address 3170 29th Street		Amount of Each Disbursement this Period 1633.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boulder State CO Zip Code 80301	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rebecca Krangle</b>		<b>Transaction ID: D166288</b> Date of Disbursement 07 / 31 / 2006
Mailing Address 11087 W 76th Place		Amount of Each Disbursement this Period 458.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Arvada State CO Zip Code 80005	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3001.96</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Jedediah Ober</b> Full Name (Last, First, Middle Initial) Mailing Address 4560 Arapahoe Ave #C City Boulder State CO Zip Code 80303 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166528</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 461.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. NGP Software</b> Full Name (Last, First, Middle Initial) Mailing Address 5505 Connecticut Avenue NW PMB 277 City Washington State DC Zip Code 20015 Purpose of Disbursement User Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166618</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 1024.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Paychex</b> Full Name (Last, First, Middle Initial) Mailing Address 4400 Kittridge Street Suite 50 City Denver State CO Zip Code 80239 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166658</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6 Amount of Each Disbursement this Period 529.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2016.06</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Bank Of America, N.A.</b>		<b>Transaction ID:</b> D167178 Date of Disbursement 08 / 15 / 2006
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 62.07
City Tampa State FL Zip Code 33622-5118	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement account fees	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

Full Name (Last, First, Middle Initial) <b>B. Geary Interactive</b>		<b>Transaction ID:</b> D162568 Date of Disbursement 08 / 14 / 2006
Mailing Address 450 B Street 9th Floor		Amount of Each Disbursement this Period 425.00
City San Diego State CA Zip Code 92101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement web hosting & fees	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

Full Name (Last, First, Middle Initial) <b>C. Craig Sellers</b>		<b>Transaction ID:</b> D166268 Date of Disbursement 07 / 31 / 2006
Mailing Address 6018 S Pierson Court		Amount of Each Disbursement this Period 1270.76
City Littleton State CO Zip Code 80127	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1757.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Brian Johnson</b> Full Name (Last, First, Middle Initial) Mailing Address 1596 Arapahoe Street City Strasburg State CO Zip Code 80136 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166229</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 1025.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Tracy Mathias</b> Full Name (Last, First, Middle Initial) Mailing Address 2301 Lawrence Street City Denver State CO Zip Code 80205 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166289</b> Date of Disbursement 07 / 31 / 2006 Amount of Each Disbursement this Period 966.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

<b>C. Jesse Hogue</b> Full Name (Last, First, Middle Initial) Mailing Address 3170 29th Street City Boulder State CO Zip Code 80301 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166519</b> Date of Disbursement 08 / 01 / 2006 Amount of Each Disbursement this Period 461.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2453.43</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Anthem Blue Cross Blue Shield</b>		<b>Transaction ID: D166549</b> Date of Disbursement 08 / 01 / 2006	
Mailing Address 700 Broadway		Amount of Each Disbursement this Period 156.10	
City Denver State CO Zip Code 80273	Purpose of Disbursement health insurance Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Transfirst</b>		<b>Transaction ID: D166579</b> Date of Disbursement 08 / 10 / 2006	
Mailing Address Colorado Business Bank c/o Transfi 371 Centennial Parkway		Amount of Each Disbursement this Period 903.07	
City Louisville State CO Zip Code 80027	Purpose of Disbursement Credit Card Processing Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Jessica O'Connell</b>		<b>Transaction ID: D166669</b> Date of Disbursement 08 / 18 / 2006	
Mailing Address 6225 W 75th Place		Amount of Each Disbursement this Period 1269.50	
City Arvada State CO Zip Code 80003	Purpose of Disbursement Payroll Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2328.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Trent Segura</b> Full Name (Last, First, Middle Initial) Mailing Address 4852 W. 127th Avenue City Broomfield State CO Zip Code 80020 Purpose of Disbursement Field Work Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D166759</b> Date of Disbursement 09 / 28 / 2006 Amount of Each Disbursement this Period 218.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. MSHC Partners</b> Full Name (Last, First, Middle Initial) Mailing Address 1155 15th Street NW City Washington State DC Zip Code 20005 Purpose of Disbursement Direct Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D167159</b> Date of Disbursement 07 / 20 / 2006 Amount of Each Disbursement this Period 8869.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>C. Murphy Putnam Shorr &amp; Partners LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 901 N Washington Street Suite 400 City Alexandria State VA Zip Code 22314 Purpose of Disbursement media fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D162569</b> Date of Disbursement 08 / 14 / 2006 Amount of Each Disbursement this Period 5174.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14262.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Hunterdon LLC</b>		Transaction ID: D162579 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6	
Mailing Address 12161 Sheridan Blvd. D120		Amount of Each Disbursement this Period 5000.00	
City Broomfield State CO Zip Code 80020	Purpose of Disbursement consulting fees	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5000.00

**TOTAL** This Period (last page this line number only) ..... ►

260851.43

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Deborah Harrell</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 385 S. Atlantic Avenue</p> <p>City Ormond Beach State FL Zip Code 32176</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166650</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Mrs. Cynthia A Carlisle</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 411 Spruce St</p> <p>City Boulder State CO Zip Code 80302-4908</p> <p>Purpose of Disbursement Refund- General Election</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166730</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Mr. James Benedict</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8297 Overland Rd</p> <p>City Ward State CO Zip Code 80481-9532</p> <p>Purpose of Disbursement Refund- General Election</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p><b>Transaction ID: D166750</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4300.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Mr. James R Merlino</b>		<b>Transaction ID: D166651</b> Date of Disbursement 08 / 16 / 2006
Mailing Address 1187 Maple Dr		Amount of Each Disbursement this Period 180.00
City Broomfield State CO Zip Code 80020-1052	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Vance Andrus</b>		<b>Transaction ID: D166711</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 13205 South Resort Drive		Amount of Each Disbursement this Period 2100.00
City Conifer State CO Zip Code 80433	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael J Ruffatto</b>		<b>Transaction ID: D166641</b> Date of Disbursement 08 / 16 / 2006
Mailing Address 4545 S Holly Street		Amount of Each Disbursement this Period 2100.00
City Englewood State CO Zip Code 80111-1143	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4380.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Ms. Dorothy M Decker</b>		<b>Transaction ID: D166751</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 395 Race St		Amount of Each Disbursement this Period 400.00
City Denver State CO Zip Code 80206-4118	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ms. Judith B Wagner</b>		<b>Transaction ID: D166722</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 4850 S Dahlia Street		Amount of Each Disbursement this Period 1150.00
City Littleton State CO Zip Code 80121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Jeffrey Kane Bridges</b>		<b>Transaction ID: D166632</b> Date of Disbursement 08 / 16 / 2006
Mailing Address 5750 S Beech Ct		Amount of Each Disbursement this Period 2100.00
City Greenwood Village State CO Zip Code 80121-3912	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3650.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kathie Anne Ruffatto</p>		<p><b>Transaction ID:</b> D166642 <b>Date of Disbursement</b> 08 / 16 / 2006</p>	
<p>Mailing Address 4545 S Holly Street</p>		<p>Amount of Each Disbursement this Period 2100.00</p>	
<p>City Englewood State CO Zip Code 80111</p>	<p>Purpose of Disbursement Refund Candidate Name Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>		<p><input type="checkbox"/></p>	

<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Carmine Iadarola</p>		<p><b>Transaction ID:</b> D166702 <b>Date of Disbursement</b> 09 / 28 / 2006</p>	
<p>Mailing Address 45 Mule Deer Trail</p>		<p>Amount of Each Disbursement this Period 1650.00</p>	
<p>City Littleton State CO Zip Code 80127-5790</p>	<p>Purpose of Disbursement Refund- General Election Candidate Name Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>		<p><input type="checkbox"/></p>	

<p><b>C.</b> Full Name (Last, First, Middle Initial) Ellen Beller</p>		<p><b>Transaction ID:</b> D166742 <b>Date of Disbursement</b> 09 / 28 / 2006</p>	
<p>Mailing Address 543 Clayton Street</p>		<p>Amount of Each Disbursement this Period 300.00</p>	
<p>City Denver State CO Zip Code 80206-4232</p>	<p>Purpose of Disbursement Refund- General Election Candidate Name Category/Type</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>		<p><input type="checkbox"/></p>	

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>4050.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Mary S Reisher</b>		<b>Transaction ID: D166752</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 4733 S Elizabeth Ct		Amount of Each Disbursement this Period 2100.00
City Englewood State CO Zip Code 80113	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ms. Jessica Hobby Catto</b>		<b>Transaction ID: D162632</b> Date of Disbursement 08 / 23 / 2006
Mailing Address 200 Navarro Suite 200		Amount of Each Disbursement this Period 400.00
City San Antonio State TX Zip Code 78205	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement general election contribution refund Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ms. Barbara Bridges</b>		<b>Transaction ID: D166633</b> Date of Disbursement 08 / 16 / 2006
Mailing Address 5750 S Beech Court		Amount of Each Disbursement this Period 2100.00
City Greenwood Village State CO Zip Code 80121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4600.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Ms. Carol R Byerly</b>		<b>Transaction ID: D166643</b> Date of Disbursement 08 / 16 / 2006
Mailing Address 3870 Birchwood Drive		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boulder State CO Zip Code 80304-1419	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. William Weeks</b>		<b>Transaction ID: D166693</b> Date of Disbursement 09 / 15 / 2006
Mailing Address 3070 E 4th Ave		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80206-4352	Category/ Type	
Purpose of Disbursement Refund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Richard Lamm</b>		<b>Transaction ID: D166733</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 5401 East Dakota Avenue, #20		Amount of Each Disbursement this Period 1900.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80246-1457	Category/ Type	
Purpose of Disbursement Refund- General Election		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6100.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Mrs. Elaine Gantz Berman</b>		<b>Transaction ID: D166753</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 1693 E Cedar Avenue		Amount of Each Disbursement this Period 1150.00
City Denver State CO Zip Code 80209	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. William B Vollbracht</b>		<b>Transaction ID: D167163</b> Date of Disbursement 09 / 28 / 2006
Mailing Address 2400 Cherry Creek South Dr Unit 402		Amount of Each Disbursement this Period 2100.00
City Denver State CO Zip Code 80209-3257	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ms. Jane C. Hays</b>		<b>Transaction ID: D162633</b> Date of Disbursement 08 / 23 / 2006
Mailing Address 55 S. Flower St		Amount of Each Disbursement this Period 400.00
City Lakewood State CO Zip Code 80226-1206	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement general election contribution refund Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3650.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Andrea Joyce</b>		Transaction ID: D166714 Date of Disbursement 09 / 28 / 2006
Mailing Address One West 64th Street		Amount of Each Disbursement this Period 2100.00
City New York State NY Zip Code 10023	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. John Langan</b>		Transaction ID: D166754 Date of Disbursement 09 / 28 / 2006
Mailing Address 58 Holly Oak Drive		Amount of Each Disbursement this Period 2100.00
City Voorhees State NJ Zip Code 08043	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Nolbert Chavez</b>		Transaction ID: D167134 Date of Disbursement 09 / 28 / 2006
Mailing Address 2000 Little Raven Unite 1B		Amount of Each Disbursement this Period 500.00
City Denver State CO Zip Code 80202-2015	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Ms. Susan Coit</b>		<b>Transaction ID:</b> D162634 Date of Disbursement 08 / 23 / 2006
Mailing Address PO BOx 2192		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Telluride	State CO	
Zip Code 81435		
Purpose of Disbursement general election contribution refund Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kay Bridges</b>		<b>Transaction ID:</b> D166645 Date of Disbursement 08 / 16 / 2006
Mailing Address 375 S Atlantic Ave		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Ormond Beach	State FL	
Zip Code 32176-8107		
Purpose of Disbursement Refund Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Gilbert Romero</b>		<b>Transaction ID:</b> D166715 Date of Disbursement 09 / 28 / 2006
Mailing Address 1601 Arapahoe Street 10th Floor		Amount of Each Disbursement this Period 1150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver	State CO	
Zip Code 80202-2015		
Purpose of Disbursement General Election Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3550.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Cynthia Delaney</b>		<b>Transaction ID:</b> D166725 Date of Disbursement 09 / 28 / 2006
Mailing Address 633 17th St FI 24		Amount of Each Disbursement this Period 500.00
City Denver State CO Zip Code 80202-3660	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Steven E Leatherman</b>		<b>Transaction ID:</b> D166735 Date of Disbursement 09 / 28 / 2006
Mailing Address 5473 Wolf Point Trail		Amount of Each Disbursement this Period 400.00
City Morrison State CO Zip Code 80465-9612	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lindsey Weaver</b>		<b>Transaction ID:</b> D166745 Date of Disbursement 09 / 28 / 2006
Mailing Address 1725 12 Ave		Amount of Each Disbursement this Period 2100.00
City Greeley State CO Zip Code 80631	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Mr. Scott Sullan</b>		<b>Transaction ID:</b> D167135 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 2005 Watson Divide		Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Snowmass State CO Zip Code 81654		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Andrew Loren Cookler</b>		<b>Transaction ID:</b> D162635 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address PO Box 358		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Nederland State CO Zip Code 80466-0358		
Purpose of Disbursement general election contribution refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Joan Ruffatto</b>		<b>Transaction ID:</b> D166636 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 4545 S Holly St		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Englewood State CO Zip Code 80111-1143		
Purpose of Disbursement Refund Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Ms. Beverly B Noun</b>		<b>Transaction ID:</b> D166726 Date of Disbursement 09 / 28 / 2006
Mailing Address 2675 Winding Trail Dr		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boulder State CO Zip Code 80304-1453	Category/ Type	
Purpose of Disbursement Refund- General Election Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gordon Gamm</b>		<b>Transaction ID:</b> D162636 Date of Disbursement 08 / 23 / 2006
Mailing Address 6609 Baseline Road		Amount of Each Disbursement this Period 11.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boulder State CO Zip Code 80303-3970	Category/ Type	
Purpose of Disbursement general election contribution refund Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Rutt Bridges</b>		<b>Transaction ID:</b> D166627 Date of Disbursement 08 / 16 / 2006
Mailing Address 1700 Lincoln Street Suite 2000		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Denver State CO Zip Code 80203	Category/ Type	
Purpose of Disbursement Refund Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4211.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Dorothy V Lamm

Mailing Address 5401 E Dakota Ave

City Denver State CO Zip Code 80246-1439

Purpose of Disbursement  
Refund- General Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D166737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lee Driscoll

Mailing Address 1130 South Franklin Street

City Denver State CO Zip Code 80210

Purpose of Disbursement  
Refund- General Election

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D166747

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Patricia McConathy

Mailing Address 225 Wall Street #250

City Vail State CO Zip Code 81657

Purpose of Disbursement  
general election contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** D162637

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Colleen Andrus</b>		<b>Transaction ID:</b> D166707 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 13205 Resort Drive		Amount of Each Disbursement this Period 500.00
City Conifer State CO Zip Code 80433	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Bruce Berger</b>		<b>Transaction ID:</b> D166728 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 482		Amount of Each Disbursement this Period 2100.00
City Aspen State CO Zip Code 81612-0482	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael W Sutton</b>		<b>Transaction ID:</b> D166748 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address PO Box 613		Amount of Each Disbursement this Period 400.00
City Westcliffe State CO Zip Code 81252-0613	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Refund- General Election Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<p><b>A. Ms. Laura P Barton</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1 Pond Dr</p> <p>City Englewood State CO Zip Code 80113-6110</p> <p>Purpose of Disbursement general election contribution refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: D162638</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p><b>B. Mrs. Annie Bridges</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 5 Walden Lane Ste 2000</p> <p>City Littleton State CO Zip Code 80121</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: D166629</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p><b>C. Brenda Lilly</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1325 S Pitkin Ave</p> <p>City Superior State CO Zip Code 80027-8131</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: D166649</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4250.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 124

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

Full Name (Last, First, Middle Initial) <b>A. Ms. Laura Linko Hill</b>		<b>Transaction ID: D166679</b> Date of Disbursement 08 / 31 / 2006	
Mailing Address 700 High St		Amount of Each Disbursement this Period 400.00	
City Denver State CO Zip Code 80218-3698	Purpose of Disbursement Refund- General Fund	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark H Carson</b>		<b>Transaction ID: D166719</b> Date of Disbursement 09 / 28 / 2006	
Mailing Address 2920 Juilliard Street		Amount of Each Disbursement this Period 1150.00	
City Boulder State CO Zip Code 80305-7036	Purpose of Disbursement Refund- General Election	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. Mr. Bruce Oreck</b>		<b>Transaction ID: D166739</b> Date of Disbursement 09 / 28 / 2006	
Mailing Address 2045 Broadway		Amount of Each Disbursement this Period 1000.00	
City Boulder State CO Zip Code 80302	Purpose of Disbursement Refund- General Election	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 124

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

**A.** Full Name (Last, First, Middle Initial)  
Dr. Robert F Hartsook

Mailing Address 12 North Channel Drive

City Wrightsville Beach State NC Zip Code 28480

Purpose of Disbursement Refund- General Election

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: D166749

Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	9		2	8		2	0	0	6

Amount of Each Disbursement this Period

1000.00
---------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

61491.00

**SCHEDULE D (FEC Form 3 )**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 123 / 124
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Peggy Lamm for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Jessica O'Connell	Nature of Debt (Purpose): staff travel - cell phone services
Mailing Address 6225 W 75th Place	
City State ZIP Code Arvada CO 80003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167536</b>	
Amount Incurred This Period 150.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor James R Merlino	Nature of Debt (Purpose): equipment rental
Mailing Address 1187 Maple Dr	
City State ZIP Code Broomfield CO 80020-1052	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167533</b>	
Amount Incurred This Period 1800.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1800.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Peggy Lamm	Nature of Debt (Purpose): candidate travel- misc.
Mailing Address 6444 Simms #132	
City State ZIP Code Arvada CO 80004	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167544</b>	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>6950.00</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Peggy Lamm for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> RBI Strategy & Research	Nature of Debt (Purpose): media commission
Mailing Address 1900 Grant Street Suite 1170	
City State ZIP Code Denver CO 80203	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167527</b>	
Amount Incurred This Period 4050.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4050.00

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Murphy Putnam Shorr & Partners LLC	Nature of Debt (Purpose): Media production
Mailing Address 901 N Washington Street Suite 400	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167480</b>	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Murphy Putnam Shorr & Partners LLC	Nature of Debt (Purpose): Media production
Mailing Address 901 N Washington Street Suite 400	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D167499</b>	
Amount Incurred This Period 8571.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 8571.33

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>22621.33</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	<b>29571.33</b>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	